**WARRANT OF DETENTION – HIGH RISK OFFENDERS**

**Criminal Law (High Risk Offenders) Act 2015**

SUPREMECOURT OF SOUTH AUSTRALIA

SPECIAL STATUTORY JURISDICTION

**[*FULL NAME*]**

**Applicant**

**[*FULL NAME*]**

**Respondent**

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| Respondent |  |
| **Full Name** |
| Address |  |
| **Street Address (including unit or level number and name of property if required)** |
|  |  |  |  |
| **City/town/suburb** | **State** | **Postcode** | **Country** |
|  |
| **Email address** |
| Date of Birth/Licence no |  |  |
| **Date of Birth** | **Licence no (if any)** |
| Phone Details |  |  |
| **Type (eg. home; work; mobile) – Number** | **Another number** |

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| **To the Sheriff, the Commissioner of Police for the State of South Australia and each member of the Police Force for the State, and the Chief Executive of the Department for Correctional Services or Department of Human Services, Youth Justice****Recitals**1. The Respondent was made subject to a supervision order.
2. The Respondent has breached a condition of the supervision order.
3. By order dated [*date*] the Court made a Continuing Detention Order pursuant to section 18 of the *Criminal Law (High Risk Offenders) Act 2015* that the Respondent be detained at a Correctional Services Institution.
* until the expiration of the Supervision Order on [*end date of Supervision Order*].
* for a lesser period of detention until [*end date of detention*].
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| **Warrant**1. The Sheriff, the Commissioner of Police, and members of the police force are directed to take the Respondent to a Correctional Services Institution.
2. The Chief Executive of the Department for Correctional Services or Department of Human Services, Youth Justice is directed to detain the Respondent for the period specified above.
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| **Authentication**…………………………………………Signature of Court Officer[*title and name*]Date warrant signed: [*date*] |